PART B - FEE(S) TRANSMITTAL

Complete and send the	his form, together w	applicable f	ee(s), to: <u>M</u>	Commissioner to P.O. Box 1450	or Patents		
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INSTRUCTIONS: This for appropriate. All further con indicated unless corrected b maintenance fee notification	elow or directed otherwise	smitting the ISSU Patent, advance or in Block 1, by (a	JE FEE and P	UBLICATION FEE (if required in the correspondence address	nired). Blocks 1 through 5 will be mailed to the current; and/or (b) indicating a sep	should be completed where t correspondence address as arate "FEE ADDRESS" for	
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WASHINGTON, DC 20004				transmitted to the OSF	(Depositor's name)		
Mayer, Brown, Rowe & Maw LLP 1909 K Street, N.W. Washington, D.C. 20006-1101					(Signature) (Date)		
APPLICATION NO.				ATTORNEY DOCKET NO.	CONFIRMATION NO.		
10/815,807 TITLE OF INVENTION: FI: 07/08/2005 MBEYENE2 000 01 FC:2501 700.0	000057 503121 108150 00 DA		Sung Mo	o Jung	-P69546US0 ➤ Please change to "1229	97-05004619	
02 FC: APPLN. TYPE 300.	N. TYPE 300-000 DASMALL ENTITY ISSUE FEE		EE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	YES	\$700		\$300	00 \$1000 07/06/2005		
EXAMINER		ART UNIT		CLASS-SUBCLASS]		
DANG, HUNG XUAN		2873		351-044000	•		
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). ***D Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. The Address indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the nam or agents O (2) the nam registered a 2 registered	For printing on the patent front page, list the names of up to 3 registered patent attorneys agents OR, alternatively, the name of a single firm (having as a member a gistered attorney or agent) and the names of up to egistered patent attorneys or agents. If no name is ed, no name will be printed. Mayer, Brown, Rowe & Maw LLP 2 2 3			
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON T	THE PATENT	(print or type)		·	
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified be 37 CFR 3.11. Completion	clow, no assignee of this form is NO	data will appea T a substitute fo	ar on the patent. If an assign or filing an assignment.	nee is identified below, the o	document has been filed for	
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
Sam Chung Optical Co., Ltd. Daegu, KOREA							
Please check the appropriate	assignee category or catego	ries (will not be pri	inted on the pat	tent): 🗖 Individualx🗗 C	orporation or other private gr	oup entity Government	
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Authorized Signature	Alubal	Lto Re	9 No. 5/18	773 Ju	ly 6, 2005		
Typed or printed name Yoon S. Ham			Registration No45,307				
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